

PATENT APPLICATION SERIAL NO. _____

U.S. DEPARTMENT OF COMMERCE
PATENT AND TRADEMARK OFFICE
FEE RECORD SHEET

07/14/2003 SMINASS1 00000009 090465 10616675

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02 FC:1202	72.00 DA
03 FC:1201	336.00 DA

Adjustment date: 11/17/2003 SSANDARA
07/14/2003 SMINASS1 00000009 090465 10616675
03 FC:1201 336.00 CR

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01 FC:1202	54.00 DA
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PTO-1556
(5/87)

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Patent Application Transmittal

17439 U.S. PTO
07/10/03

Commissioner for Patents
P.O. Box 1450
Mail Stop Patent Application
Alexandria, VA 22313-1450

17575 U.S. PTO
10/6/03
07/10/03

Sir:

Transmitted herewith for filing is the Patent Application of:

Inventor: Daniel Charles Birkestrand et al.

For: **APPARATUS AND METHOD FOR ASSURING RECOVERY OF
TEMPORARY RESOURCES IN A LOGICALLY PARTITIONED COMPUTER
SYSTEM**

ASSIGNEE NAME: INTERNATIONAL BUSINESS MACHINES CORPORATION

ASSIGNEE RESIDENCE: ARMONK, NEW YORK

Enclosed are:

- ☒ 23 Pages of Specification and 1 Abstract
☒ 7 Sheets of Drawings
☒ A Declaration and Power of Attorney
☒ An Information Disclosure Statement and form PTO/SB/08A
☐ A certified copy of foreign application
☒ An Assignment of the invention to International Business Machines Corporation, Armonk,
 New York 10504

The filing fee has been calculated as follows:

For:	No. Filed	No. Extra
Basic Fee		
Total Claims	24 -20 =	4
Indep. Claims	6 -3 =	3
<input type="checkbox"/> Multiple Dependent Claim Presented		

Other Than Small Entity

Rate	Fee
	\$ 750.00
x \$18.00=	\$ 72.00
x \$84.00=	\$ 252.00
\$280.00	\$ 00.00
TOTAL	\$1,074.00

EXPRESS MAIL CERTIFICATE

Express Mail Label No.: ET747048835US
 Date: July 10, 2003

I hereby certify that I am depositing the enclosed or attached paper with the U.S. Postal Service "Express Mail Post Office to Addressee" service on the above date, addressed to the Commissioner for Patents, P.O. Box 1450, Mail Stop Patent Application, Alexandria, VA 22313-1450.

Deb Peterson

Deb Peterson

Patent Application Transmittal

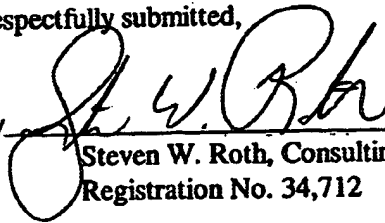
Attorney Docket No. ROC920030150US1

Deposit Account Authorization:

- ☒ Please charge Deposit Account No. 09-0465 in the amount of \$1,074.00. A duplicate copy of this sheet is enclosed.
- ☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 09-0465. A duplicate copy of this sheet is enclosed.
- ☒ Any additional filing fees required under 37 C.F.R. §1.16.
- ☒ Any patent application processing fees under 37 C.F.R. §1.17.

Respectfully submitted,

By



Steven W. Roth, Consulting Attorney
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Date: July 10, 2003

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